

Obesity experts call for stricter rules on junk food ads targeted at children

Papers published in Lancet medical journal insist politicians must press WHO to bring in code to prevent children being encouraged to make poor dietary choices



Children's poor nutrition worldwide – including in the UK – leads to stunted growth as well as obesity. Photograph: Matt Cardy/Getty Images

Sarah Boseley

Tough new controls must be introduced worldwide to stop commercial companies marketing unhealthy foods and drinks which make children overweight and stunt their growth, say some of the world's leading obesity experts.

No country has yet reversed its obesity epidemic, they point out in a major new series of six papers in the [Lancet medical journal](#). The best that has been achieved is a flattening of childhood obesity rates in countries like the US and UK, but not among poorer families. The levels are still very high, which means that many thousands of overweight

children will have health problems as adults. In England, a third of 10- to 11-year-olds and more than a fifth of four- to five-year-olds are overweight or obese.

Tim Lobstein and colleagues, in one of the papers, call for governments to press the [World Health Organisation](#) to take radical action so that children do not develop a taste for sweet drinks and unhealthy food. They say it should bring in a code of marketing, similar to that which prevents baby milk companies promoting their products to women in a way that deters them from breastfeeding.

“The food industry has a special interest in targeting children,” they write. “Not only can the companies influence children’s immediate dietary preferences, but they can also benefit from building taste preferences and brand loyalty early in life, which last into adulthood.”

Lobstein and colleagues calculate the money to be made by food companies from overweight children. “Fat children are an investment in future sales,” said Lobstein, from the London-based [World Obesity Federation](#). They use data from the USA, where children are on average 5kg heavier than those of 30 years ago, and so consume an extra 200 kcal a day more than a child from the 1970s would have – or 73,000 kcal more per year.

The average cost of food energy is about 56 cents per 100kcal, they say – so 200kcal a day implies spending an extra \$1.12 a day per child, or more than \$400 a year. “With about 50 million school-age children in the USA, the combined value of their excess food consumption each year approaches \$20bn. A high proportion of these children will continue over-consuming through adulthood, creating a market for the US food and beverage industry, which we estimate to be worth considerably more than \$60bn each year.”

With such high sums at stake, says the paper, the food industry is likely to resist controls in the same way that the tobacco and alcohol industries have.

Children's poor nutrition worldwide – including in the UK– leads to stunting as well as obesity. It is not only in poor countries that stunting – poor growth in children eating food without sufficient nutrients – exists side by side with obesity. The authors point out that the national school measurement programme in England shows children in poor households are not only likely to be fatter but also shorter than children in affluent families.

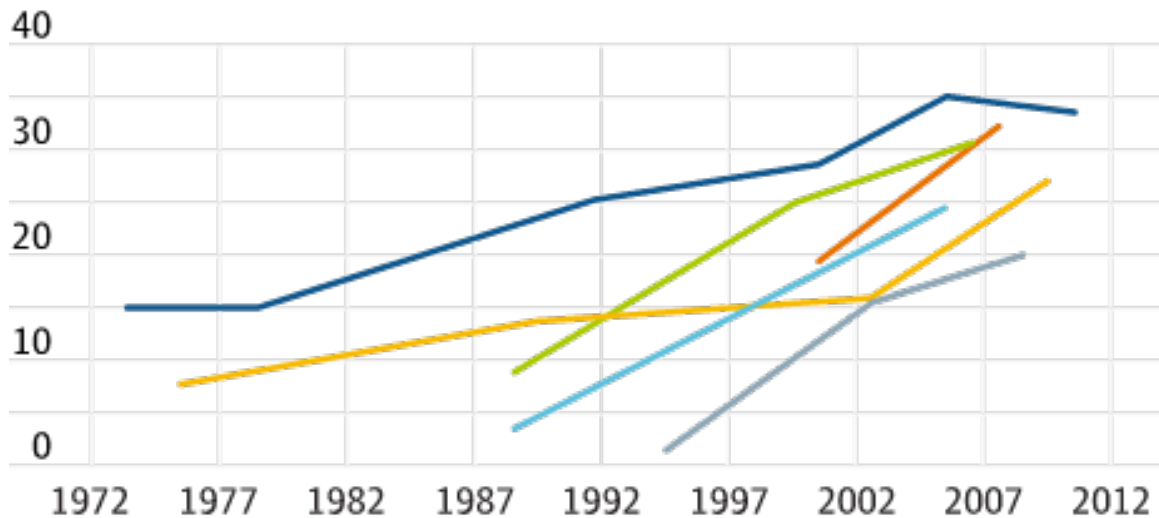
To protect the health of children, there must be “substantial change in the governance of food supplies, controls on commercial competition and measures to promote and protect healthy food supplies,” they say.

“Food supply targets cannot be left to the whim of multinational food companies, commodity markets and speculative financiers, but will need to be kept under tight supervision and regulation.”

Child obesity

Percent of children overweight or obese

● US ● Mexico ● Brazil ● Saudi Arabia ● Iran ● South Africa



Average increase in a US child's weight over 30 years

33%

Of children in the US are now overweight or obese

GUARDIAN GRAPHIC

SOURCE: WORLD OBESITY FEDERATION

In the lead paper in the series, Dr Christina Roberto, from the [Harvard T.H. Chan School of Public Health](#) in the US and colleagues say that obesity is too often simplistically pitched as a competition between personal responsibility and state intervention or government regulation versus industry's voluntary controls.

“Our understanding of obesity must be completely reframed if we are to halt and reverse the global obesity epidemic. On one hand, we need to acknowledge that individuals bear some responsibility for their health, and on the other hand recognise that today's food environments exploit people's biological (e.g., innate preference for sweetened foods), psychological (eg, marketing techniques), and social and economic (eg,

convenience and cost) vulnerabilities, making it easier for them to eat unhealthy foods,” she said.

“It’s time to realise that this vicious cycle of supply and demand for unhealthy foods can be broken with ‘smart food policies’ by governments alongside joint efforts from industry and civil society to create healthier food systems.”

A third paper examines the UK government’s public health responsibility deal with the food industry, however, and finds it lacks any means of monitoring or verifying the calorie-cutting pledges of food and drinks companies. That is “problematic and substantially reduces the credibility of the self-reported information provided by companies,” say Boyd Swinburn, from the [University of Auckland](#) in New Zealand, and colleagues.

“The government has yet to publicly implement an action plan to hold non-compliant and under-performing companies to account,” they say. An independently appointed body or ombudsman is needed “to monitor the fidelity of the UK government’s provision of incentives and disincentives to industry and the enforcement of policies, regulations and laws.”

The Food and Drink Federation has a policy position on its website with regard to the responsibility deal: “We support the responsibility deal as providing an effective framework within which Government, industry, NGOs and health professionals can debate issues honestly and work together effectively to tackle public health challenges.”